1992 North Carolina Behavioral Risk Factor Surveillance System (BRFSS) Questionnaire N = 2140 Respondents

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Note: This e questionnaire	lectronic questionnaire is from CDC and is formatted differently from the binder.	eir paper version in the

The interview will only take a short time, and all the information obtained in this study will be confidential. First, I'd like to begin by asking you about using seatbelts. . . .

Section A: Seatbelts

1.	How often	do you use seatbelts when you drive or ride in a car?	(33)
	Would you	say: Please Read	
	a.	Always	1
	b.	Nearly always	2
	C.	Sometimes	3
	d.	Seldom	4
	or		
	e.	Never	5
		Don't know/Not sure	7
		Never drive or ride in a car	8
		Refused	9

Section B: Hypertension

Was it:

These next questions are about hypertension or high blood pressure:

2. About how long has it been since you last had your blood pressure taken by a doctor, nurse, or other health professional? (34)

Please Read

a.	Within the past six months (0 to 6 months ago)	1
b.	Within the past year (7 to 12 months ago)	2
C.	Within the past two years (13 to 24 months ago)	3
d.	Within the past five years (25 to 60 months ago)	4
or		
e.	More than five years ago (61+ months ago)	5
	Don't know/Not sure	7
	Never	8
	Refused	9

3.		ever been told by a doctor, nurse, or other hea igh blood pressure? (35)	lth professional that
	a.	No Go to Section C (p. 6)	1
	b.	Yes, by a doctor	2
	C.	Yes, by a nurse	3
	d.	Yes, by other health professional	4
		Don't know/Not sure Go to Section C (p. 6)	7
		Refused Go to Section C (p. 6)	9
4.		peen told on more than one occasion that your bloom been told this only once? (36)	ood pressure was high
	a.	More than once	1
	b.	Only once	2
		Don't know/Not sure	7
		Refused	9
5.	Is any medi	cine currently prescribed for your high blood pre	ssure?(37)
	a.	Yes	1
	b.	No	2
		Don't know/Not sure	7
		Refused	9

Section C: Exercise

The	next	few	questic	ons	are	about	exercise,	recreation,	or	physical	activities	other
than	your	requ	ular jok	o du	uties							

than	your regula	ar job duties.		
6.	During th exercises exercise?	e past month, did you particip such as running, calisthenics,	ate in any phys golf, gardenin (38)	sical activities or g, or walking for
	a.	Yes		1
	b.	No Go to Section D (p. 9)		2
		Don't know/Not sure Go to Section	on D (p. 9)	7
		Refused Go to Section D (p. 9)		9
7.		of physical activity or exercise past month?	e did you spend † 39-40)	the most time doing
	Acti	vity (specify):		Coo godina ligt D
				see couring rist A
		Refused Go to Q. 11 (p. 7)	9	9
		question 8 only if answer to questing, walking, or swimming. All ot		ion 9.
8.	How far di	d you usually walk/run/jog/swim?	(41-43)	
	Mile	s and tenths	_	
	Don'	t know/Not sure	7	7 7
	Refu	sed	9	9 9
9.	How many t	times per week or per month did yoonth?	ou take part in t (44-46)	this activity during
	a.	Times per week	1 .	
	b.	Times per month	2	
		Don't know/Not sure	7	7 7
		Refused	9	9 9
10.	And when yusually ke	you took part in this activity, foreep at it?	or how many minut (47-49)	es or hours did you
		Hours and minutes		:
		Don't know/Not sure	7	7 7
		Refused	9	9 9

11.	Was there the last m	another physical activity or exercise that onth?	you participated in during 50)
	a.	Yes	1
	b.	No Go to Section D (p. 9)	2
		Don't know/Not sure Go to Section D (p. 9	9) 7
		Refused Go to Section D (p. 9)	9
12.	What other past month	type of physical activity gave you the nex	ext most exercise during the
	Activ	vity (specify):	
	See o	coding list A	
	Refus	sed Go to Section D (p. 9)	9 9
		Ask question 13 only if answer to questi walking, or swimming. All others go to qu	
13.	How far di	d you usually walk/run/jog/swim?	(53-55)
	Miles	s and tenths	:_
	Don't	t know/Not sure	7 7 7
	Refus	sed	9 9 9
14.	How many t	imes per week or per month did you take part (56-58)	t in this activity?
	a.	Times per week	1
	b.	Times per month	2
		Don't know/Not sure	7 7 7
		Refused	9 9 9
15.	And when y usually ke	rou took part in this activity, for how man ep at it? (59-61)	ny minutes or hours did you
		Hours and minutes	_:
		Don't know/Not sure	7 7 7
		Refused	9 9 9

The next few questions are about efforts to lose weight. Are you now trying to lose weight? (62)a. Yes 1 No Go to Section E (p. 10) b. 2 Refused Go to Section E (p. 10) 9 (63) 17. Are you eating fewer calories to lose weight? a. Yes 1 b. No 2 Don't know/Not sure 7 Refused 9 18. Have you increased your physical activity to lose weight? (64) a. Yes 1 b. No 2 Don't know/Not sure 7 Refused 9 Section E: Tobacco Use Now I'd like to ask you a few questions about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life? 19. (65) a. Yes 1 No Go to Section F (p. 12) b. 2 Don't know/Not sure Go to Section F (p. 12) 7 Refused Go to Section F (p. 12) 9 20. About how old were you when you first started smoking cigarettes fairly regularly? (66-67)Code age in years Don't know/Not sure 7 7 Never smoked regularly 8 8 Refused

Section D: Weight Control

21.	Do you smo	ke cigarettes now?	(68)
	a.	Yes	1
	b.	No Go to Q. 24 (p. 11)	2
	Refus	sed Go to Section F (p. 12)	9
22.	On the ave	rage, about how many cigarettes a day do you no (69-70)	w smoke?
	a.	Number of cigarettes	
	b.	Don't smoke regularly	8 8
		Refused	9 9
23.	During the	past 12 months, have you quit smoking for 1 day	y or longer? (71)
	a.	Yes Go to Section F (p. 12)	1
	b.	No Go to Section F (p. 12)	2
		Don't know/Not sure Go to Section F (p. 12)	7
		Refused Go to Section F (p. 12)	9
24.	About how	long has it been since you last smoked cigarett	es regularly? (72)
		Was it: Please Read	
	a.	Less than 1 month	1
	b.	One month to less than 3 months	2
	С.	Three months to less than 6 months	3
	d.	Six months to less than 1 year	4
	e.	One year to less than 5 years	5
	or		
	f.	Five or more years ago	6
		Don't know/Not sure	7
		Never smoked regularly	8
		Refused	9

Section F: Alcohol Consumption

These next few questions are about the use of beer, wine, wine coolers, cocktails, or liquor, such as vodka, gin, rum, or whiskey, all kinds of alcoholic beverages that people drink at meals, special occasions, or when just relaxing.

peop.	le drink at	meals, special occasions, or when just relaxi	ng.
25.		nad any beer, wine, wine coolers, cocktails, t is, since? (73)	or liquor during the past
	a.	Yes	1
	b.	No Go to Section G (p. 14)	2
		Refused Go to Section G (p. 14)	9
26.		e past month, how many days per week or per beverages, on the average? (74	month did you drink any -76)
	a.	Days per week	1
	b.	Days per month	2
		Don't know/Not sure Go to Q. 28 (p. 13)	7 7 7
		Refused Go to Q. 28 (p. 13)	9 9 9
27.	cooler, 1	s 1 can or bottle of beer, 1 glass of wine, cocktail, or 1 shot of liquor. On the days s did you drink on the average?	1 can or bottle of wine when you drank, about how (77-78)
		Number of drinks	
		Don't know/Not sure	7 7
		Refused	9 9
28.	cocktails,	g all types of alcoholic beverages, that is and liquor, as drinks, how many times durimore drinks on an occasion? (79-80)	
	a.	Number of times	
	b.	None	8 8
		Don't know/Not sure	7 7
		Refused	9 9
29.		g the past month, how many times have you o much to drink?	ı driven when you've had (81-82)
	a.	Number of times	
	b.	None	8 8
		Don't know/Not sure	7 7
		Refused	9 9

Section G: Preventive Health Practices

Some people visit a doctor for a routine checkup, even though they are feeling well

			it a doctor for a routine checkup, even though they are n sick.	feeling well	
30.	About check		long has it been since you last visited a doctor for (83) it:	or a routine	
		a.	Within the past year (0 to 12 months ago)	1	
		b.	Within the past two years (13 to 24 months ago)	2	
		C.	Within the past five years (25 to 60 months ago)	3	
		or			
		d.	More than five years ago (61+ months ago)	4	
			Don't know/Not sure	7	
			Never	8	
			Refused	9	
	e next blood.	quest	cions are about blood cholesterol, which is a fatty substa	ance found in	
31.	Have	you e	ver had your blood cholesterol checked? (84)		
		a.	Yes	1	
		b.	No Go to Q. 36 (p. 16)	2	
			Don't know/Not sure Go to Q. 36 (p. 16)	7	
			Refused Go to Q. 36 (p. 16)	9	
32.	About	how i	long has it been since you last had your blood cholesterol (85)	checked?	
		Was i	it: Please Read		
		a.	Within the past year (0 to 12 months ago)	1	
		b.	Within the past two years (13 to 24 months ago)	2	
		C.	Within the past five years (25 to 60 months ago)	3	
		or			
		d.	More than five years ago (61+ months ago)	4	
			Don't know/Not sure	7	
			Never	8	
			Refused	9	

33.	Have you e	ever been told your blood cholesterol level, in (86)	numbers?
	a.	Yes	1
	b.	No Go to Q. 35 (p. 16)	2
		Don't know/Not sure Go to Q. 35 (p. 16)	7
		Refused Go to Q. 35 (p. 16)	9
34.	What is yo	our blood cholesterol level?	(87-89)
		Record the number	
		Don't know/Not sure	7 7 7
		Refused	9 9 9
35.	Have you e	ever been told by a doctor or other health pro ol is high? (90)	
	a.	Yes	1
	b.	No	2
		Don't know/Not sure	7
		Refused	9
36.	Next, I'd	like to ask you about diabetes, sometimes call	ed sugar diabetes.
	Have you e	ever been told by a doctor that you have diabet	es? (91)
	a.	Yes	1
	b.	No	2
		Don't know/Not sure	7
		Refused	9

Section H: Health Insurance

These next questions are about health care plans which include health insurance, prepaid plans such as HMOs (health maintenance organizations), or government plans such as Medicare.

37.	Do you have	e any kind of health care plan?	(92)
	a.	Yes	1
	b.	No Go to Q. 41 (p. 18)	2
		Don't know/Not sure Go to Q. 41 (p. 18)	7
		Refused Go to Q. 41 (p. 18)	9
38.	For hospita	al bills, does your health care plan cover all, most, ses?	, some, or none of
	a.	All	1
	b.	Most	2
	c.	Some	3
	d.	None	4
		Don't know/Not sure	7
		Refused	9
39.		to a doctor's office when you are sick, does your most, some, or none of your expenses? (94)	health care plan
	a.	All	1
	b.	Most	2
	C.	Some	3
	d.	None	4
		Don't know/Not sure	7
		Refused	9
40.	When you as	re not sick, does your health care plan cover all, meckups or other preventive services?(95)	most, some, or none
	a.	All	1
	b.	Most	2
	C.	Some	3
	d.	None	4
		Don't know/Not sure	7

9

Refused

41.	Was the						12	months	when	-	needed (96)	to	see	a	doctor,	but
	a.	•	Yes												1	
	b.	•	No												2	
			Don't	know/No	ot si	ıre									7	
			Refuse	ed											9	

Section I: Demographics

These next few questions ask for a little more information about yourself.

		_		_		
42.	How old we	re you on your last birt	hday?	(97-9	8)	
		Code age in years				
		Don't know/Not sure			0 7	
		Refused			0 9	
43.	What is yo	ur race?			(99)	
	Woul	d you say:	Please Read			
	a.	White			1	
	b.	Black			2	
	C.	Asian, Pacific Islander	c c		3	
	d.	Aleutian, Eskimo, or An	merican Indian		4	
	or					
	e.	Other: (specify)			5	
		Don't know/Not sure			7	
		Refused			9	
44.	Are you o Rican, or	f Hispanic origin such Cuban?	as Mexican American, (100)		American,	Puerto
	a.	Yes			1	
	b.	No			2	
		Don't know/Not sure			7	
		Refused			9	

45.	What is th	e highest grade or year of school you completed?	(101)
		Read only if Necessary	
	a.	Eighth grade or less	1
	b.	Some high school	2
	C.	High school graduate or GED certificate	3
	d.	Some technical school	4
	e.	Technical school graduate	5
	f.	Some college	6
	g.	College graduate	7
	h.	Postgraduate or professional degree	8
		Refused	9
46.	Are you cu	rrently:	
		Please Read	(102)
	a.	Employed for wages	1
	b.	Self-employed	2
	C.	Out of work for more than 1 year	3
	d.	Out of work for less than 1 year	4
	e.	Homemaker	5
	f.	Student	6
	or		
	g.	Retired	7
		Refused	9

47. And are you:

48.

49.

Don't know/Not sure

Refused

And are ye	Please Read	(103)								
a.	Married	1								
b.	Divorced	2								
C.	Widowed	3								
d.	Separated	4								
e.	Never been married	5								
or										
f.	A member of an unmarried couple	6								
	Refused	9								
Which of from all s	Which of the following categories best describes your annual household income from all sources? (104)									
	Please Read									
a.	Less than \$10,000	1								
b.	\$10,000 to less than \$15,000	2								
С.	\$15,000 to less than \$20,000	3								
d.	\$20,000 to less than \$25,000	4								
e.	\$25,000 to less than \$35,000	5								
f.	\$35,000 to \$50,000	6								
or										
g.	Over \$50,000	7								
	Don't know/Not sure	8								
	Refused	9								
About how	much do you weigh without shoes?	(105-107)								
Weig	ht	pounds								

7

9 9

9

TT - 4 - 4	_	,				
Heigh		$\overline{ft} \ / \ \overline{inches}$				
Don't	know/Not sure	7 7 7				
Refus	ed	9 9 9				
	Interviewer: Ask if necessary.					
51. Indicate se	ex of respondent.	(111)				
a.	Male Go to Section K (p. 28)	1				
b.	Female	2				
Section J: Women	n's Health					
	ask you a few questions about a medical exx-ray of the breast and involves pressing					
52. Have you eve	er had a mammogram?	(112)				
a.	Yes	1				
b.	No Go to Q. 55 (p. 24)	2				
	Don't know/Not sure Go to Q. 55 (p. 24)	7				
	Refused Go to Q. 55 (p. 24)	9				
53. How long ha	as it been since you had your last mammogram	? (113)				
	Read only if Necessa	ary				
a.	1 year ago or less	1				
b.	More than 1 year ago, but less than, or equal to, 2 years ago	2				
С.	More than 2 years ago, but less than, or equal to, 3 years ago	3				
d.	More than 3 years ago, but less than, or equal to, 5 years ago	4				
e.	More than 5 years ago	5				
	Don't know/Not sure	7				
	Never	8				
	Refused	9				

(108-110)

50.

About how tall are you without shoes?

54.	Was	your	last	mamm	ogram	done	as	part	of	a	routine	check	up,	beca	ause	of	а	breast
	prol	olem	other	than	cance	r, o	r b	ecause	уо	u'v	ve alread	dy had	bre	ast	cano	er?		
									(11	4)							

a.	Routine checkup	1
b.	Breast problem	2
C.	Had breast cancer	3
	Don't know/Not sure	7
	Refused	9

	_			out a cli r, nurse,			_	exam,	the	breast	is
55.	Have you	ever	had a	clinical	breast	exam?		(115	5)		

a.	Yes	1
b.	No Go to Q. 58 (p. 25)	2
	Don't know/Not sure Go to Q. 58 (p. 25)	7
	Refused Go to Q. 58 (p. 25)	9
ong h	as it heen since your last breast evam?	(11

56. How long has it been since your last breast exam? (116)

Read only if Necessary

a.	1 year ago or less	1
b.	More than 1 year ago, but less than, or equal to, 2 years ago	2
С.	More than 2 years ago, but less than, or equal to, 3 years ago	3
d.	More than 3 years ago, but less than, or equal to, 5 years ago	4
e.	More than five years ago	5
	Don't know/Not sure	7
	Never	8
	Refused	9

Was your last breast exam done as part of a routine checkup, because of a breast problem other than cancer, or because you've already had breast cancer? (117)57.

a.	Routine checkup	1
b.	Breast problem	2
C.	Had breast cancer	3
	Don't know/Not sure	7
	Refused	9

These next questions are about Pap smears. A Pap smear is a test where material is taken from the cervix, that is the mouth of the womb, to see if any cancer cells are present.

58.	Have you ev	ver had a Pap smear?	(118)
	a.	Yes	1
	b.	No Go to Q. 61 (p. 26)	2
		Don't know/Not sure Go to Q. 61 (p. 26)	7
		Refused Go to Q. 61 (p. 26)	9
59.	How long ha	as it been since you had your last Pap smear? Read only if Necessary	(119)
	a.	1 year ago or less	1
	b.	More than 1 year ago, but less than, or equal to, 2 years ago	2
	С.	More than 2 years ago, but less than, or equal to, 3 years ago	3
	d.	More than 3 years ago, but less than, or equal to, 5 years ago	4
	e.	More than 5 years ago	5
		Don't know/Not sure	7
		Never	8
		Refused	9
60.		ast pap smear done as part of a routine exam, or to don't for some other reason?	heck (120)
	a.	Routine exam	1
	b.	Check problem	2
	C.	Other	3
		Don't know/Not sure	7
		Refused	9
61.	Have you ha	ad a hysterectomy (that is, an operation to remove th	e uterus/womb)?
	a.	Yes Go to Section K (p. 28)	1
	b.	No	2
		Don't know/Not sure	7
		Refused	9

Inter		k these two questions only of females between twise, go to Section K (p. 28).	en 18 and 45 years of age.
62.	To your kno	owledge, are you now pregnant?	(122)
	a.	Yes	1
	b.	No Go to Section K (p. 28)	2
		Don't know/Not sure Go to Section K (p. 28	7
		Refused Go to Section K (p. 28)	9
63.	During what	month is your baby due?	(123-124)
		Code Month Don't know/Not sure	7 7
		Refused	9 9
Section	on K: AIDS		
		uestions are to determine your beliefs and o	pinions about
64.	Have you ev	ver heard the AIDS virus called by the name I (125)	HIV?
	a.	Yes	1
	b.	No	2
		Don't know/Not sure	7
		Refused	9
65.		nowledge, are there drugs available that ca ected with the AIDS virus? (12	an lengthen the life of a 26)
	a.	Yes	1
	b.	No	2
		Don't know/Not sure	7
		Refused	9
66.	Do you thir and healthy	nk a person who is infected with the AIDS vi	rus can look and feel well 27)
	a.	Yes	1
	b.	No	2
		Don't know/Not sure	7
		Refused	9

67.	Do you thi	nk a person	Yes	No No	DK/NS Ref		rus irom:	
	a. Donati	ng blood?	1	2	7	9	(128)	
	a nurs dentis health who ha	cared for by se, doctor, st, or other a care worker as the AIDS	<u>c</u>					
	virus?		1	2	7	9	(129)	
68.	Do you thi	nk a pregnar	nt woman	who has the A	AIDS virus ca		t to her ba	aby?
	a.	Yes					1	
	b.	No					2	
		Don't know	/Not sur	е			7	
		Refused					9	
69.	Do you hav	re a child or	childre	en in kinderga (13	rten through	n eighth	grade?	
	a.	Yes					1	
	b.	No Go to	Q. 72 (p. 30			2	
		Don't know	/Not sur	e Go to Q. 7	2 (p. 30)		7	
		Refused G	o to Q.	72 (p. 30)				9
70.	Would you infected w	allow your with the AIDS	child of the child	to be in the	same class	room wit (132)	h a child	who is
	a.	Yes					1	
	b.	No					2	
		Don't know	/Not sur	е			7	
		Refused					9	
71.	At what gr	rade do you t	chink you	ır child shoul	d begin AIDS (133-134)	S educati	on in schoo)1?
	a.	Code grade						
	b.	Never					8 8	
		Don't know	/Not sur	е			7 7	
		Refused					9 9	

72.	Would	you e	eat in a restaurant where the cook is infected (135)	with the AIDS virus?
		a.	Yes	1
		b.	No	2
			Don't know/Not sure	7
			Refused	9
73.	Would	you k	oe willing to work with a person who is infecte (136)	d with the AIDS virus?
		a.	Yes	1
		b.	No	2
			Don't know/Not sure	7
			Refused	9
74a.	Where	could	d you go to be tested for the AIDS virus infect (137-138)	ion?
		Facil	Lity code	
	If re	spond	ent answered "No place," "Don't know," or "Re	efused," go to question
74b.	Where	else	could you go?	(139-140)
		Facil	lity code	
			Please do not read list	
		a. b. c. d. e. f. h. i. k. l.	Private doctor, HMO Blood bank, plasma center, Red Cross Health department AIDS clinic, AIDS testing site Hospital, emergency room Family planning clinic STD clinic Community health clinic, primary care clinic Company or industry clinic Military induction or examination Other No place Don't know/Not sure Refused	01 02 03 04 05 06 07 08 09 10 87 88 77

75.	activity.	How effe	ndoms to ke ctive do yo gh sexual ac	u think	using a					
	Would	d you say:		Pleas	e Read					
	a.	Very effe	ective					1	-	
	b.	Somewhat	effective					2	}	
	or									
	C.	Not at al	l effective					3	ŀ	
		Don't kno	w how effec	tive				4	:	
		Don't kno	w method					5	;	
		Refused						9)	
76.	How many d	ifferent r	esidential t	celephone	e number	s do you (14		at this h	ouseh	old?
			n telephone s that can i				set if	necessar	y. I	nclude
	Total	telephone	e numbers					_		
Closi	ng Statemen	t								
That'	s my last o	question.	Everyone's	answers	will b	e combin	ned to	give us	infor	mation

That's my last question. Everyone's answers will be combined to give us information about the health practices of people in this state. Thank you very much for your time and cooperation.

Module 1: County of Residence

1. What	county	do	you	live	in?	
---------	--------	----	-----	------	-----	--

(144-146)

County code		. <u>-</u>	_	
Don't know/Not sure	•	7	7	7
Refused	!	9	9	9

Code description

- 01. Aerobics class
- 02. Backpacking
- 03. Badminton
- 04. Basketball
- 05. Bicycling for pleasure
- 06. Boating (canoeing, rowing,

sailing for pleasure or camping)

- 07. Bowling
- 08. Boxing
- 09. Calisthenics
- 10. Canoeing/rowing-in competion
- 11. Carpentry
- 12. Dancing-aerobics/ballet
- 13. Fishing from river bank or boat
- 15. Golf
- 16. Handball
- 17. Health club exercise
- 18. Hiking-cross-country
- 19. Home exercise
- 20. Horseback riding
- 21. Hunting large game-deer, elk
- 22. Jogging
- 23. Judo/karate
- 24. Mountain climbing
- 25. Mowing lawn
- 26. Paddleball
- 27. Painting/papering house

Code description

- 28. Racketball
- 29. Raking lawn
- 30. Running
- 31. Rope skipping
- 32. Scuba diving
- 33. Skating-ice or roller
- 34. Sledding, tobogganing
- 35. Snorkeling
- 36. Snowshoeing
- 37. Snow shoveling by hand
- 38. Snow blowing
- 39. Snow skiing
- 40. Soccer
- 41. Softball
- 42. Squash
- 43. Stair climbing
- 44. Stream fishing in waders
- 45. Surfing
- 46. Swimming laps
- 47. Table tennis
- 48. Tennis
- 49. Touch football
- 50. Volleyball
- 51. Walking
- 52. Waterskiing
- 53. Weight lifting
- 54. Other
- 55. Bicycling machine exercise

56. Rowing machine exercise

Lap Swimming

Size	pool	Laps
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50 ft. pool 10 laps = .1 mile 100 ft. pool 5 laps = .1 mile 50 meter pool 3 laps = .1 mile

Running/Jogging/Walking

1/2 mile = .5 mile 1/4 mile = .3 mile 1/8 mile = .1 mile 1 block = .1 mile